

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 14  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		<b>FEC IDENTIFICATION NUMBER ▼</b>	
		<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> <b>C</b> C00484287         </div>	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			

Full Name of Payee <b>NCFO/SEIU 32BJ</b>			Date of Public Distribution/Dissemination	
Mailing Address 1212 Bath Ave Floor F&O			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">26</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
City Ashland	State KY	Zip Code 41101-2696	Amount <div style="border: 1px solid black; display: inline-block; padding: 2px 20px;">55.03</div>	
Purpose of Expenditure InKind Staff		Category/ Type <div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">001</div>	<b>Transaction ID : D541931</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">26</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
Name of Federal Candidate MITCH MCCONNELL			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; display: inline-block; padding: 2px 20px;">40103.18</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>NCFO/SEIU 32BJ</b>			Date of Public Distribution/Dissemination	
Mailing Address 1212 Bath Ave Floor F&O			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">26</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
City Ashland	State KY	Zip Code 41101-2696	Amount <div style="border: 1px solid black; display: inline-block; padding: 2px 20px;">55.03</div>	
Purpose of Expenditure InKind Staff		Category/ Type <div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">001</div>	<b>Transaction ID : D541932</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">26</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
Name of Federal Candidate ALISON LUNDERGAN GRIMES			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; display: inline-block; padding: 2px 20px;">40103.18</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; display: inline-block; padding: 2px 20px;">110.06</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; display: inline-block; padding: 2px 20px;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; display: inline-block; padding: 2px 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

09

28

2014

Signature